PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further cor indicated unless corrected by maintenance fee notification	respondence including the pelow or directed otherwise is.	Patent, advance or in Block 1, by (a	ders and not) specifying	ification of maintenance fees vanew correspondence address				
DI059 75 BERESKIN AND 40 KING STREET BOX 401	PARR WEST (any change of address) OVPE JUL 1 9 20	18088 06 30	Fee(s) Transmittal. The papers. Each additions have its own certificate.	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
TORONTO, ON M5H 3Y2					(Depositor's nar			
		TRADENIA				(Signature)		
						(Date)		
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.		
09/926,375	09/926,375 02/28/2002		Cecil W. Forsberg		6580-270	9974		
TITLE OF INVENTION: TI	RANSGENIC ANIMALS E	XPRESSING SAL	IVARY PRC	TEINS				
APPLN. TYPE	SMALL ENTITY	ISSUE FI	FEE PUBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1400)	\$0	\$1400	07/25/2006		
EXAMINER		ART UNIT		CLASS-SUBCLASS]			
BERTOGLIO, VALARIE E		1632		800-014000	_			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	THE PATEN	Γ (print or type)		<u> </u>		
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN		elow, no assignee of this form is NO		pear on the patent. If an assign for filing an assignment. ENCE: (CITY and STATE OR (document has been filed for		
	sity of Guelp assignee category or catego			lph, Ontario, patent): ☐ Individual ☎ C		roup entity - 🗖 Government		
Advance Order - # of	mall entity discount permitte Copies	ed) ·	Payment The Dire	Fee(s): in the amount of the fee(s) is end by credit card. Form PTO-203: ctor is hereby authorized by characteristic by	8 is attached. arge the required fee(s), or cr	edit any overpayment, to tra copy of this form).		
 Change in Entity Status a. Applicant claims SI 	(from status indicated above MALL ENTITY status. See	,	☐ b. Applic	cant is no longer claiming SMA	LL ENTITY status. See 37 C	CFR 1.27(g)(2).		
The Director of the USPTO NOTE: The Issue Fee and Printerest as shown by the reco	is requested to apply the Issi ublication Fee (if required) vords of the United States Pate	ue Fee and Publica will not be accepted ent and Trademark	tion Fee (if and from anyon Office.	ny) or to re-apply any previous e other than the applicant; a reg	ly paid issue fee to the applic			

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Authorized Signature

Typed or printed name __Micheline Gravelle

Bereskin & Parr

INTELLECTUAL PROPERTY LAW

July 18, 2006



Micheline Gravelle B.Sc., M.Sc. (Immunology) 416 957 1682 mgravelle@bereskinparr.com

Your Reference: 09/926,375 Our Reference: 6580-270

ISSUE FEE

The Commissioner of Patents & Trademarks
Washington, D.C. 20231
U.S.A.

Dear Sir:

Re: United States Patent Application No. 09/926,375

Filed: February 28, 2002

Entitled: TRANSGENIC ANIMALS EXPRESSING SALIVARY PROTEINS

Inventors: Cecil W. Forsberg et. al.

Art Unit: 1632

Class-Subclass: 800-014000 Examiner: Valarie E. Bertoglio

This correspondence is in response to the Notice of Allowance dated April 25, 2006. Enclosed is the completed Issue Fee Transmittal Form for filing in connection with this application.

Applicant submits herewith the issue fee of \$1400.00. This fee is included in our firm cheque no. 8164

Please ensure that the patent issues in the name of the University of Guelph.

If any additional fee is due, including a fee for an extension of time, such an extension is hereby requested, and the Commissioner is authorized to charge any such fee to Deposit Account No. 02-2095.

Respectfully submitted,

Cecil W. Forsberg et. al.

Micheline Gravelle

Registration No. 40,261

MG/vh Encl. JUL 1 9 2006

PTO/SB/17 (01-06) Approved for use through 07/31/2006. OMB 0651-0032

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Food purposes to the Connellidated App	emprinting Act 2005 (U.D. 404)		Complete if Known								
Fees pursuant to the Consolidated App		■ Application Number	09/926,3	75							
FEE TRAN	12MIIIYL	Filing Date	February	February 2, 2002							
For FY	First Named Inventor	Cecil W. Forsberg									
Applicant claims small entity s	Examiner Name	Valarie E. Bertoglio									
	Art Unit	1632									
TOTAL AMOUNT OF PAYMENT (\$) 1400.00		Attorney Docket No.	6580-270								
METHOD OF PAYMENT (check all that apply)											
Check Credit Card Money Order None Other (please identify):											
Deposit Account Deposit Account Number: 02-2095 Deposit Account Name:											
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee											
Charge any additional fee(s) or underpayments of fee(s)											
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.											
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)											
1. BASIC FILING, SEARCH, A	ND EXAMINATION FEE	S		 							
FILI	NG FEES SE Small Entity		MINATION								
Application Type Fee		Small Entity (\$) Fee (\$) Fe	Small (\$) Fee		es Paid (\$)						
Utility 300	150 50	0 250 20	0 10	0							
Design 200	100 10	0 50 13	0 6	5							
Plant 200	100 30	0 150 16	0 8	0							
Reissue 300	150 50	0 250 60	0 30	0							
Provisional 200	100	0 0	0	0							
2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$)											
Each claim over 20 (including Each independent claim over				50 2 200 10	5						
Multiple dependent claims	1 3 (metading Keissues)			200 10 360 18	-						
Total Claims Extra	Fee Paid (\$)										
- 20 or HP =	x=_		<u> </u>	ee (\$) <u>Fe</u>	e Paid (\$)						
HP = highest number of total claims p Indep. Claims Extra	.	ee Paid (\$)									
- 3 or HP =	x= _										
HP = highest number of independent claims paid for, if greater than 3.											
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer											
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50											
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)											
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)											
4. OTHER FEE(S) Non-English Specification,		Fees Paid (\$)									
Other (e.g., late filing surcharge): Issue Fees 1400.00											
SUBMITTED BY (V)											
ignature	D. CLIPUD.	Registration No. (Attorney/Agent) 40,261		Telephone 416-3	64-7311						
Vame (Print/Type) Micheline Gravelle	(Attorney/Agent) 40,261		Date July 18, 20								

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.